

STUDENT TRANSPORT AND EMERGENCY CHILD CARE PLAN

The following information will help the teacher get your child home safely after school.

Child's Name

Grade

Teacher's Name

Please check the appropriate box:

Walk AM PM

Parent will transport AM PM

Ride the bus AM PM

Ride home with family member, daycare, sitter, or neighbor

Family member, daycare, sitter, or neighbor's name _____

Phone Number _____

Kids Network AM PM (if applicable)

Other Specific Instructions _____

INCLEMENT WEATHER INFORMATION/OTHER EMERGENCY

Due to inclement weather, it is sometimes necessary to cancel school during the school day. Please fill in the following information so that we will know what you want your child to do in case of such an emergency.

In case of early dismissal I would like my child to:

Walk

Parent will transport

Ride the bus

Ride with family member, daycare, sitter, or neighbor

Family member, daycare, sitter, or neighbor's name _____

Phone Number _____

Kids Network (if applicable)

Other Specific Instructions _____

Sibling

Grade

Teacher

Sibling

Grade

Teacher

Parent home phone number _____

Parent work phone number _____

Parent cell or pager number _____

Parent Signature

Date